

## EXHIBIT 430

1                   IN THE UNITED STATES DISTRICT COURT  
2                   FOR THE NORTHERN DISTRICT OF OHIO  
3                   EASTERN DIVISION  
4   IN RE:   NATIONAL                   :   MDL No. 2804  
5            PRESCRIPTION OPIATE       :  
6   LITIGATION                        :   Case No. 17-md-2804  
7                                       :  
8   APPLIES TO ALL CASES           :   Judge Dan Aaron Polster  
9                                       :  
10                                      :  
11                                      :

12                                      HIGHLY CONFIDENTIAL  
13                   SUBJECT TO FURTHER CONFIDENTIALITY REVIEW  
14

15                                      - - - -

16                                      DECEMBER 13, 2018

17                                      - - - -

18   VIDEOTAPED DEPOSITION OF HBC SERVICE COMPANY'S  
19           DESIGNATED 30(B)(6) REPRESENTATIVE,  
20                   JAMES TSIPAKIS,  
21   taken pursuant to notice, was held at Marcus & Shapira,  
22   One Oxford Center, 35th Floor, Pittsburgh, Pennsylvania  
23   15219, by and before Ann Medis, Registered Professional  
24   Reporter and Notary Public in and for the Commonwealth  
25   of Pennsylvania, on Thursday, December 13, 2018,  
commencing at 9:09 a.m.

26                                      - - - -

27                                      GOLKOW LITIGATION SERVICES  
28                                      877.370.3377 phone | 917.591.5672 fax  
29                                      deps@golkow.com

1           A.     Yes.

2           Q.     It also included I think, as you just  
3     said, noncontrolled substances such as blood  
4     pressure medicine, acne medication, birth control.  
5     All those types of things would be included;  
6     correct?

7           A.     Yes.

8           Q.     And all those things are under the  
9     purview of Mr. Durr; correct?

10          A.     Yes.

11          Q.     Are you aware of any data, reports or  
12     information that Mr. Durr had available to him to  
13     assist him in identifying any patterns of Schedule  
14     III drug orders, specifically HCPs, that would  
15     have deviated from the norm?

16          A.     Through this process I did not find  
17     any -- you keep asking me reports. I did not find  
18     any reports that he'd be looking at. But, again,  
19     as part of this integrated process, he would be  
20     working with our operations folks. The operation  
21     folks oversee the stores. So it's a closed  
22     system. So there's a negative feedback loop  
23     within that system.

24          Q.     And I'm not trying to ask a question  
25     that I already know the answer to. I'm just

1     trying to be inclusive when I say data, report  
2     information --

3           A.     Sure. And I'm trying to do my best to  
4     answer what it is you're looking for.

5           Q.     I understand. But I didn't want you to  
6     get focused on the word reports. You're not aware  
7     of any information, data that Mr. Durr had  
8     available to him to assist him with identifying  
9     patterns that deviated from the norm?

10          A.     What I'm saying is I don't have -- other  
11     than written documents, I don't have -- I'm not  
12     privy to the conversations and the pieces and the  
13     things that he did as part of running his  
14     warehouse.

15          Q.     When you got information from Mr. Durr,  
16     he didn't say, I had this report to review or I  
17     had this dataset that I got sent to me on a  
18     regular basis. He didn't say anything like that?

19          A.     I didn't read any of that, no.

20          Q.     I'm going to ask you the same questions  
21     as it relates to Mr. Carlson and the other folks  
22     that would have been in procurement.

23                 Are you aware of any data, information,  
24     reports that they had available to them to assist  
25     them in identifying any patterns of HCPs ordering

1 that would have deviated from the norm?

2 A. Certainly the folks in corporate would  
3 have information on what's being purchased by our  
4 stores and certainly feedback from the operations  
5 team that oversee these stores. But through this  
6 process, I didn't have any specific reports or  
7 documented -- I go back to reports because we're  
8 not privy to the conversations and to how they did  
9 their job or didn't do their job on a day-to-day  
10 basis from what I could read.

11 Q. I understand. What I hear you to be  
12 saying is the information you got from  
13 Mr. Carlson, who was one of the procurement folks  
14 during this timeframe, was that he didn't inform  
15 you of any data, reports or information that he  
16 was provided on a regular basis for him to review  
17 orders to see whether or not there was a pattern  
18 that deviated from the norm?

19 MR. BARNES: You mean other than what  
20 he's testified to?

21 MR. GADDY: I asked the question.

22 MR. BARNES: Object to form. Asked and  
23 answered.

24 THE WITNESS: What I'm saying is through  
25 what I reviewed from Mr. Carlson, I couldn't

1     ascertain what he used or didn't use to do this  
2     job.

3     BY MR. GADDY:

4           Q.     There was no paper identified, no  
5     report, no Excel spreadsheet, nothing like that  
6     that was identified by Mr. Carlson, Mr. Durr or  
7     any information you received from the pickers, no  
8     documents that were identified that were reviewed  
9     to assist with this process; correct?

10          A.     Specifically, again, our system  
11     continued to be improved and changed over time.  
12     And there were certainly procedures that were  
13     buttressed and improved over time. But certainly  
14     through what I read, there was nothing on a report  
15     or, to your point, Excel spreadsheet that I did  
16     glean. It doesn't mean there wasn't any. It  
17     wasn't in what I had read.

18          Q.     You spent 40 to 50 hours preparing for  
19     today; correct?

20          A.     Yes, sir.

21          Q.     You made every effort to get all the  
22     information you could; correct?

23          A.     Yes.

24          Q.     You mentioned that the system had  
25     improvements over time.

1 A. Yes.

2 Q. I think you said that at some point in  
3 time, there was a threshold program implemented?

4 A. Yes.

5 Q. When did HBC first start utilizing a  
6 threshold program?

7 A. A threshold program with some IT  
8 enhancements were put into place roughly in 2013.

9 Q. Do you know what month in 2013 or season  
10 even?

11 A. I don't recall exactly in 2013.

12 Q. And were thresholds set for every  
13 prescription drug or just controlled substances?

14 A. Controlled substances.

15 Q. And that included Schedule III  
16 controlled substances?

17 A. Yes.

18 Q. How were thresholds established? Let me  
19 back up before you answer that. I'm making an  
20 assumption that threshold is a monthly ordering  
21 threshold. Am I wrong on that?

22 A. So the threshold established was using  
23 diligence that was ascertained at the time from  
24 DEA that a 3X threshold to be established, a  
25 monthly threshold, to your point, using 12 months

1 of trailing data, 3X the average for that month.

2 Q. Let me say it back to you to make sure I  
3 understand it. This threshold program which was  
4 first begun in 2013 set a threshold at 3 times the  
5 average amount of that substance that was  
6 distributed over the last 12 months?

7 A. So 3X the company average for that  
8 chemical. So it was at the GPI level. So the  
9 chemical would include all the drugs having that  
10 chemical in it, 3X using 12 months of trailing  
11 data, 3X the company average for that chemical,  
12 that product.

13 Q. So you explained two things there.  
14 First of all, it was based on the chemical?

15 A. GPI level, yes.

16 Q. Does that mean that Lortab and Vicodin  
17 don't get different thresholds. They're all under  
18 the same threshold?

19 A. It's all lumped together as one  
20 threshold.

21 Q. Because that's the same combination of  
22 hydrocodone and acetaminophen?

23 A. It's looking at the active ingredient,  
24 yes.

25 Q. As far as how the threshold is set, if



1 HBC had sold a hundred HCP products over a month  
2 for the last 12 months, the threshold for the next  
3 month would have been 300; is that fair?

4 A. Well, the threshold was -- yes. Let me  
5 just play that back. So it would be 3X again at  
6 the GPI level of that GPI using the 12 months  
7 worth of data, yes.

8 Q. So months 1 through 12 Giant Eagle  
9 pharmacies had ordered 100 hydrocodone combination  
10 products?

11 A. All included.

12 Q. Correct. Then in month 13 the threshold  
13 would be 300?

14 A. Well, it uses the average of the 12  
15 months of data. When the new month comes on, the  
16 furthest out drops off. It's a rolling 12 months  
17 worth of data, yes.

18 Q. But I have that math right, in month 13,  
19 the threshold would be 300 because the prior 12  
20 months, the average was 100?

21 A. But again, it uses the last 12 months.  
22 So assuming that it was a hundred all those  
23 months, it would be 3X which would be 300, yes.

24 Q. You said it was a rolling system. So at  
25 the 13th month, instead of HBC distributing a

1     hundred HCPs and it distributed 200, the threshold  
2     for the 14th month would be different. It would  
3     not be the same 300 because that last month would  
4     have affected the average; correct?

5           A.     Each datapoint adds to the average. And  
6     certainly the reason for that is there's  
7     seasonality in our business as well where products  
8     change over time, yes. The demand for products  
9     change over time.

10          Q.     When you say seasonality, do you mean  
11     different times of years or do you mean --

12          A.     Yes. Different times of year, cough and  
13     cold season versus summer months, yes.

14          Q.     Is there a hydrocodone combination  
15     product season?

16          A.     Well, certainly hydrocodone products in  
17     cough syrups, it is more prevalent during cough  
18     and cold season than it is during summer months.

19          Q.     I think I heard you mention that HBC  
20     received guidance from the DEA that a 3 times  
21     average was an appropriate threshold.

22          A.     What I said is during the due diligence  
23     to set the threshold, information was derived from  
24     the DEA published websites on a 3X threshold that  
25     they used for list chemicals, and that's where our

1 3X number was derived from.

2 Q. You're talking about the chemical  
3 handler's manual?

4 A. From what I -- to prepare for this, it  
5 was based on written DEA inference on a website or  
6 a manual, I'm not sure where it was derived from,  
7 but the DEA itself was establishing a 3X  
8 threshold, and the team adopted that rationale.

9 Q. Are you testifying that the DEA had  
10 suggested a 3X threshold for opioids?

11 A. I'm testifying that the HBC warehouse  
12 and the team involved found data that pointed to a  
13 3X threshold tier, and that's what they adopted.

14 Q. But for opioids. That's my question.  
15 Are you testifying that HBC had information from  
16 the DEA that they were approving or ratifying or  
17 blessing, whatever verb you want to use, a 3X  
18 threshold in 2013 for opioids?

19 A. No. That is not what I'm saying.

20 Q. Then help me understand.

21 A. What I'm saying is in the diligence to  
22 set the threshold, Giant Eagle inferred from  
23 information that they gleaned from the website, a  
24 manual, whatever it was, that established a 3X  
25 threshold is where they want -- the DEA was -- the

1     DEA over the years has not been clear about what  
2     their expectations were of any threshold.

3             So it left each registrant to set whatever  
4     parameters and controls that they deemed  
5     appropriate. So our team used whatever they could  
6     find that was reasonably available and reasonable  
7     to set our thresholds.

8             Q.     The DEA never told HBC that a three  
9     times average was appropriate; correct?

10            A.     Directly, no, never.

11            Q.     Did DEA indirectly tell HBC that a three  
12    times average was appropriate?

13            A.     What I'm saying is the HBC set its  
14    threshold based on information that it gleaned  
15    from a DEA -- just like you showed me earlier, a  
16    page from the DEA website. There was information  
17    that they used from DEA and inferred to use a 3X  
18    threshold.

19            HBC set the threshold, but it wasn't just  
20    some arbitrary number they picked. There was  
21    information they used to get to a 3X threshold.

22            Q.     I'll show you what I'll mark as No. 13.

23                    (HBC-Tsipakis Exhibit 13 was marked.)

24    BY MR. GADDY:

25            Q.     I'm showing you a June 2, 2012 letter

1 from Joe Rannazzisi with the DEA. Do you see  
2 that?

3 A. Yes.

4 Q. Have you ever seen this before?

5 A. Yes.

6 Q. Did you have the opportunity to review  
7 this document in preparing for your deposition  
8 today?

9 A. Not all of it.

10 Q. I'll represent to you and you can flip  
11 through it and we'll look through some of this,  
12 but it's a 2012 letter, and attached to that  
13 letter were earlier letters, two from 2007 and one  
14 from 2006.

15 Do you see that?

16 A. Yes.

17 Q. And are you aware that HBC received this  
18 letter?

19 MR. BARNES: Just the one on top or all  
20 of them?

21 MR. GADDY: The one at the top with the  
22 attachments.

23 THE WITNESS: I'm not aware of whether  
24 HBC received these letters or not. As a matter of  
25 common sense, we weren't registered in 2007. So I